

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Lawrence Martin

Name

(2) PO Box 120336

Address (number and street)

Fort Lauderdale, FL 33312

City, State, Zip Code

☐ Check here if address has changed

(3) ID Number: _____

OFFICE USE ONLY

RECEIVED

NOV 12 2019

CITY CLERK'S OFFICE

(4) Check appropriate box(es):

☒ Candidate Office Sought: Lauderhill City Commissioner, Seat 1

☐ Political Committee (PC)

☐ Electioneering Communications Org. (ECO)

☐ Party Executive Committee (PTY)

☐ Independent Expenditure (IE) (also covers an individual making electioneering communications)

☐ Check here if PC or ECO has disbanded

☐ Check here if PTY has disbanded

☐ Check here if no other IE or EC reports will be filed

(5) Report Identifiers

Cover Period: From 10 / 01 / 2019 To 10 / 31 / 2019 Report Type: M10

☒ Original

☐ Amendment

☐ Special Election Report

(6) Contributions This Report

Cash & Checks \$ _____ , _____ , _____ . _____

Loans \$ _____ , _____ , _____ . _____

Total Monetary \$ _____ , _____ , _____ . _____

In-Kind \$ _____ , _____ , _____ . _____

(7) Expenditures This Report

Monetary Expenditures \$ _____ , _____ , _____ . _____

Transfers to Office Account \$ _____ , _____ , _____ . _____

Total Monetary \$ _____ , _____ , _____ . _____

(8) Other Distributions

\$ _____ , _____ , _____ . _____

(9) TOTAL Monetary Contributions To Date

\$ _____ , _____ , 550 . 00

(10) TOTAL Monetary Expenditures To Date

\$ _____ , _____ , 342 . 98

(11) Certification

It is a first degree misdemeanor for any person to falsify a public record (ss. 839.13, F.S.)

I certify that I have examined this report and it is true, correct, and complete:

(Type name) Barbara Gayle

☐ Individual (only for IE or electioneering comm.) ☒ Treasurer ☐ Deputy Treasurer

X Barbara Gayle

Signature

(Type name) Lawrence Martin

☒ Candidate ☐ Chairperson (only for PC and PTY)

X

Signature